



State of New Hampshire 2014 ANNUAL REPORT

The following information shall be given as of January 1
preceeding the due date Pursuant to RSA 304-C:80.

REPORT DUE BY April 1, 2014

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE
WILL BE ASSESSED A LATE FEE.

Filed
Date Filed: 06/02/2014
Business ID: 436931
William M. Gardner
Secretary of State

LINCOLN CENTER NORTH, LLC

PO BOX 681

LINCOLN, NH 03251

ADDRESS OF PRINCIPAL OFFICE:

ROUTE 112

LINCOLN, NH 03251

REGISTERED AGENT AND OFFICE:

Bartlett, Paul A.

Y RIVERVIEW DR PO BOX 681

LINCOLN, NH 03251

ENTITY TYPE: LLC

BUSINESS ID: 436931

STATE OF DOMICILE: NEW HAMPSHIRE

REAL EST.

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

☐

The new mailing address

☐

The new principal office address

PO Box is acceptable.

MANAGERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

LIST AT LEAST ONE MANAGER BELOW OR MEMBER ON RIGHT

NAME Paul Anthony Bartlett

STREET 27 Riverview Drive

CITY/STATE/ZIP Lincoln NH 03251

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAMES AND ADDRESSES OF ADDITIONAL MANAGERS/MEMBERS ARE ATTACHED

MEMBERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

MUST LIST AT LEAST ONE MEMBER BELOW IF NO MANAGERS

NAME Paul Anthony Bartlett

STREET 27 Riverview Drive

CITY/STATE/ZIP Lincoln NH 03251

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

To be signed by the manager, if no manager, must be signed by a member.

I, the undersigned, do hereby certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here:

Paul A. Bartlett

Please print name and title of signer:

Paul A. Bartlett

NAME

1 Manager

TITLE

FEE DUE: \$0.00

E-MAIL ADDRESS (OPTIONAL):

State of New Hampshire
Fee - Form LLC 8 - (LLC) 1 Page(s)

WHEN THIS FORM IS
PUBLIC DOCUMENT
REQUIRED INFORMATION



T1415327059

WILL BECOME A
PUBLIC DISCLOSURE
WILL BE REJECTED

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RETURN COMPLETED REPORT AND PAYMENT TO:

New Hampshire Department of State, Annual Reports, 107 N. Main St., Room 204, Concord, NH 03301

OK AP